

society for disability studies

**SHORT TERM SPECIAL INCENTIVES FROM OCTOBER TO DECEMBER
2019**

Organizational, Group & Corporate Memberships

(You may also complete and submit this via our website disstudies.org.)

**PO Box 5570
Eureka, CA 95502**

An Organizational Membership includes the benefit of supporting student learning and professional development by providing several Individual Memberships with an Organizational Membership.

We will also work with you to prominently display information about our Organizational Members on a new page of our website to promote your activities.

See the SDS website for more information about Individual Memberships. Please provide contact information for all of your designated Sponsored individual Members in Section 2 below as soon as you can. Use additional sheets as necessary.

Section 1: Organization Information

Organization Name: [Click here to enter text.](#)

Contact Person Name: [Click here to enter text.](#)

This person may or may not also be a full Voting Member.

I am the Contact Person only and not a Voting Member in our Bundle.

I am the Contact Person AND a Voting Member in our Bundle.

Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

City: [Click here to enter text.](#)

State/Province: [Click here to enter text.](#)

Zip/Postal Code: [Click here to enter text.](#)

Country: [Click here to enter text.](#)

Telephone: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

Other Notes: [Click here to enter text.](#)

Type of Organizational Membership Choose ONE:

Disability Studies: Not for Profit Organization Member. Any Group with a Budget under \$1 Million. Usually includes 1 Professional and 4 Student Memberships. DUES \$500.

- 2019 Special #1:** TWO (2) Professional & TWO (2) Student Members.
- 2019 Special #2:** ONE (1) Professional & SIX (6) Student Members.
- 2019 Special #3:** TEN (10) Student Members.
- 2019 Special #4:** Write to SDS@disstudies.org to request a custom Bundle.

Affiliate: Any Group with a Budget under \$1 Million with One (1) Designated Member.

- Affiliate:** Any Group with a Budget under \$1 Million. DUES \$200.
- Affiliate:** A small or low budget Group. DUES \$40.

Sustaining: Corporation or other Group over \$1 Million. Usually includes FIVE (5) Professional Members. DUES \$5,000 (Negotiable).

- 2019 Special #4: Sustaining** with TEN (10) (usually five) Professional Memberships.
- 2019 Special #5: Sustaining** with FIVE (5) Professional Memberships and TEN (10) Student Memberships.
- 2019 Special #6: Sustaining** with a custom mix of Professional Memberships and Student Memberships. Enter your request here: [Click here to enter text.](#)

Section 2: Payment Information

TOTAL AMOUNT DUE \$ 40, \$ 200, \$ 500, \$5,000. Other by Arrangement \$ [Click here to enter text.](#)

Payment Method, via our Online Store is the Preferred Option:

- By Credit Card via our online store: <https://squareup.com/store/society-for-disability-studies>.
- Check (Made out to SDS and Mailed to PO Box 5570, Eureka, CA 95502)
- Please Invoice me.
- Other (For other payment options please contact Susan@disstudies.org.)

By Credit Card Below:

- MC Visa AMEX Discover

Name as on Account Card: [Click here to enter text.](#)

Account Number: [Click here to enter text.](#)

Expiration Date (MM/YY): [Click here to enter text.](#)

Three-digit Security Code: [Click here to enter text.](#)

Your Billing Address: [Click here to enter text.](#)

Contact Email Address: [Click here to enter text.](#)

Contact Phone Number: [Click here to enter text.](#)

E mail or Postal Mail this form and payment to:

SDS, PO Box 5570, Eureka, CA 95502 USA. - sds@disstudies.org.

Section 3: Designated Sponsored Members

You may complete this now or later.

Designated Member #1:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

I understand that I will be added to the SDS Members Discussion Email List by default.

I do not want to be on the main discussion list.

I am interested in serving on an SDS Committee.

Designated Member #2:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

I understand that I will be added to the SDS Members Discussion Email List by default.

I do not want to be on the main discussion list.

I am interested in serving on an SDS Committee.

Designated Member #3:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

- I understand that I will be added to the SDS Members Discussion Email List by default.
- I do not want to be on the main discussion list.
- I am interested in serving on an SDS Committee.

Designated Member #4:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

- I understand that I will be added to the SDS Members Discussion Email List by default.
- I do not want to be on the main discussion list.
- I am interested in serving on an SDS Committee.

Designated Member #5:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

- I understand that I will be added to the SDS Members Discussion Email List by default.
- I do not want to be on the main discussion list.
- I am interested in serving on an SDS Committee.

Designated Member #6:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

- I understand that I will be added to the SDS Members Discussion Email List by default.
- I do not want to be on the main discussion list.
- I am interested in serving on an SDS Committee.

Designated Member #7:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

I understand that I will be added to the SDS Members Discussion Email List by default.

I do not want to be on the main discussion list.

I am interested in serving on an SDS Committee.

Designated Member #8:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

I understand that I will be added to the SDS Members Discussion Email List by default.

I do not want to be on the main discussion list.

I am interested in serving on an SDS Committee.

Designated Member #9:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

I understand that I will be added to the SDS Members Discussion Email List by default.

I do not want to be on the main discussion list.

I am interested in serving on an SDS Committee.

Designated Member #10:

Professional Member

Student/Low-Income Member

Name & Title/Position: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

I understand that I will be added to the SDS Members Discussion Email

List by default.

- I do not want to be on the main discussion list.
- I am interested in serving on an SDS Committee.

Use additional sheets as necessary.

Thank you for joining and supporting SDS!